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## UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorne	ey Docket	No.	002939.00003	70
First Ir	ventor	Arsin	ur Burcoglu	=
Title	Method Thereof		ting HIV Infection and Related Secondary Infections	0050
Expres	ss Mail Lat	bel No.		3

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

APPLICATION ELEMENTS				Commissioner for Patents  ADDRESS TO: Mail Stop Patent Application					
See MPEP chapter 600 concerning utility patent application contents.					ADDRESS TO: Mail Stop Patient Application P.O. Box 1450 Alexandria VA 22313-1450				
	Fee Transmittal Form (e.g., PTO/SB/17)				7. CD-ROM or CD-R in duplicate, large table or				
_ `	Submit an original and a duplicate for fee processing)  Applicant claims small entity status.			Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission					
_	See 37 CFR 1.27.			(if applicable, all necessary) a. ☐ Computer Readable Form (CRF)					
<i>(</i>	Specification [Total Pages 89 ] (preferred arrangement set forth below) - Descriptive title of the Invention - Cross Reference to Related Applications			b. Specification Sequence Listing on:					
-				i. ☐ CD-ROM or CD-R (2 copies); or					
	Statement Regarding Fed s Reference to sequence listi			ii. ⊠ paper c. ⊠ Statements verifying identity of above copies					
	or a computer program listing Background of the Invention			ACCOMPANYING APPLICATIONS PARTS					
-	Brief Summary of the Inven Brief Description of the Dra	tion		9. 🔲	•		er sheet & document(s))		
-	Detailed Description	iiiigo ( ii iiioo)		10. 37 C.F.R. 3.73(b) Statement Power of					
-	Claim(s) Abstract of the Disclosure			(when there is an assignee) Attorney  11.  English Translation Document (if applicable)					
	rawing(s) ( <i>35 U.S.C.11</i> 3		ets <u>6</u> ]	12.	Information		Copies of IDS		
	☑ Formal  ☐ Informa Declaration	l [Total Shed	ets <b>3</b> ]	12. 🖂		(IDS)/PTO-144	_ ,		
	Newly executed (original	•	210 <u>0</u> ]	13. 🛚		Amendment			
b. 🛛 (	Copy from a prior applica	ation (37 CFR 1.	63 (d))	14. Return Receipt Postcard (MPEP 503)  (Should be specifically itemized)					
_	(for a continuation/divis		8 completed)	15. Certified Copy of Priority Document(s)					
i. <u>L</u>	DELETION OF INV Signed statement attache		(s)	(if foreign priority is claimed) 16. □ Nonpublication Request under 35 U.S.C. 122					
	named in the prior applica 1.63(d)(2) and 1.33(b).	tion, see 37 CFR		(b)(2)(B)(i). Applicant must attach form PTO/SB/35					
6. Application Data Sheet. See 37 CFR 1.76				or its equivalent. 17. ☐ Other:					
18. If a CO	18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:								
	· · · · <u>—</u>			in-part (C	(IP) of pric	or application	No: 09 / 754.066		
Prior app	☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: <u>09</u> / <u>754,066</u> Prior application information: Examiner <u>Shin Lin Chen</u> Art Unit: <u>1632</u>								
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference.									
The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.									
19. CORRESPONDENCE ADDRESS									
☐ Customer Number: 22907			or Correspondence address below						
Name									
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Address									
City			State			Zip Code			
Country		Tele	phone			Fax			
Name (Print/Type) Dale H. Hoscheit 1 Registration No. (Attorney/Agent) 19,090					19,090				
Signature				Date	February 2, 2004				

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

385

TOTAL AMOUNT OF PAYMENT

Complete if Known				
Application Number	TBA			
Filing Date	February 2, 2004			
First Named Inventor	Arsinur Burcoglu			
Examiner Name	ТВА			
Art Unit	ТВА			
Attorney Docket No.	002939.00003			

ME	FEE CALCULATION (continued)						
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None			3. ADDITIONAL FEES				
	<u>Large</u>	Entity	Small E	ntity			
☐ Deposit Accou	Fee Code	Fee	Fee	Fee	Fee Description Fee Paid		
Deposit 40.0733			(\$)		· (\$)		
Account 19-0733 Number			130 50	2051 2052	65 25	Surcharge - late filing fee or oath Surcharge - late provisional filing fee	
Rumber		1052	30	2032	25	or cover sheet.	
Deposit	1053	130	1053	130	Non-English specification		
Account Name	Banner & Witcoff, LTD.	1812	2,520	1812	2,520	For filing a request for reexamination	
	thorized to: (check all that apply)	1804	920*	1804 .	920*	Requesting publication of SIR prior to Examiner action	
Charge fee(s) in      Charge any add     C	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action		
Charge fee(s) in	ndicated below, except for the filling fee fied deposit account.	1251	110	2251	55	Extension for reply within first month	
to the above-identi	FEE CALCULATION	1252	420	2252	210	Extension for reply within second month	
1. BASIC FI	LING FEE	1253	950	2253	475	Extension for reply within third month	
Large Entity 5	Small Entity	1254	1,480	2254	740	Extension for reply within fourth month	
	ee Fee <u>Fee Description</u> ode (\$)	1255	2,010	2255	1,005	Extension for reply within fifth month	
*	001 385 Utility filing fee 385	1401	330	2401	165	Notice of Appeal	
	002 170 Design filing fee	1402	330	2402	165	Filing a brief in support of an appeal	
1003 530 2	003 265 Plant filing fee	1403	290	2403	145	Request for oral hearing	
	004 385 Reissue filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1005 160 2005 80 Provisional filling fee			110	2452	55	Petition to revive - unavoidable	
SUBTOTAL (1) (\$) 385			1,330	2453	665	Petition to revive – unintentional	
		1501	1,330	2501	665	Utility issue fee (or reissue)	
2. EXTRA CLA	IM FEES FOR UTILITY AND REISSUE	1502	480	2502	240	Design issue fee	
	Extra Fee from Fee Claims below Paid	1503	640	2503	320	Plant issue fee	
Total Claims 1	-20 ** = 0 X 9 = 0	1460	130	1460	130	Petitions to the Commissioner	
Independent		1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)	
Claims 1	-3** = 0 X 43 = 0	1806	180	1806	180	Submission of Information Disclosure Stmt	
Multiple Dependent  Large Entity	X 145 = 0	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
Fee Fee Code (\$)	Fee Fee Fee Description Code (\$)	1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1202 18	2202 9 Claims in excess of 20	1810	770	2810	385	For each additional invention to be	
1201 86	2201 43 Independent claims in excess of 3					examined (37 CFR § 1.129(b))	
1203 290	2203 145 Multiple dependent claim, if not paid	1801	770	2801	385	Request for Continued Examination (RCE)	
1204 86	2204 43 ** Reissue independent claims over original patent	1802	900	1802	900	Request for expedited examination	
1205 18	of a design application  Other fee (specify)						
SUBTOTAL (2) (\$) 0							
**or number previo	ously paid, if greater; For Reissues, see above	Redu	cea by Ba	asic fili <b>n</b> g	ree P	aid SUBTOTAL (3) (\$) 0	
and the second s							

SUBMITTED BY	1	1	Complete (if applicable)
Name (Print/Type)	Dale H Hospheit	Registration No. (Attorney/Agent) 19,0	90 Telephone / 202-824-3000
Signature	ININIAL STRUUL	(1)	Date 1/1/1/2/ February 2, 2004

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